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To: Assistant Commissioner for Patents	From: Estella Pineiro Patent Administrator 818-493-2251
Attention: TECHNOLOGY CENTER 3700 Examiner: Shevon E. Johnson Art Unit: 3766	ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221
Telecopier: 571-273-8300	Telecopier: 818/362-4795
RE: Amendment and Request for Reconsideration App. No.: 10/657,840 Filed: 09/08/2003 Docket No.: A03P1062US03 Confirmation No.: 1754	Number of pages being sent: <u>14</u> (including cover page)

**PLEASE DELIVER TO EXAMINER SHEVON E. JOHNSON,
Art Unit 3766.
Thank you.**

PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Mark W. Kroll	Confirmation No.:	1754
Serial No.:	10/657,840	Examiner:	Shevon E. Johnson
Filed:	09/08/2003	Art Unit:	3766
Docket No.:	A03P1062US03		
For:	SYSTEM AND METHOD FOR PROVIDING PREVENTIVE OVERDRIVE PACING AND ANTITACHYCARDIA PACING USING AN IMPLANTABLE CARDIAC STIMULATION DEVICE		

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TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

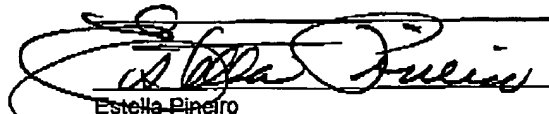
Dear Sir:

Submitted herewith for filing are the following documents:

- X Amendment and Request for Reconsideration
X Transmittal Letter, Fee and Cert. of Mailing

I hereby certify that this correspondence is being facsimile
transmitted to the United States Patent and Trademark Office on:

June 1, 2006

 6/1/06
Estelle Pineiro Date

PATENT

CALCULATION OF FEES						
ITEM		NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADD'L CLAIMS FILED	LARGE ENTITY FEE	\$ FEE
A	TOTAL CLAIMS FEE	18	20	0	X \$ 50	\$ 0
B	INDEPENDENT CLAIMS FEE**	4	4	0	X \$200	0
C	MULTIPLE- DEPENDENT				X \$ 360	0
D	EXTENSION OF TIME FEE — 1-mon: \$120; 2-mon: \$450; 3-mon: \$1,020; 4-mon: \$1,590; 5-mon: \$2,160					450
E	ADDITIONAL FEES (i.e., Surcharge — Late Fee- Declaration; Petitions; Information Disclosure Statement; Terminal Disclaimer, etc.) Specify:					
F	TOTAL ADDITIONAL FEE** (ADD TOTALS FOR LINES A,B,C,D, and E)					\$ 450**

<input checked="" type="checkbox"/> Charge Deposit Account No. 16-0068 the amount of	\$450**	A copy of this letter is enclosed.
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☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-0068

☒ Any additional filing fees required under 37 CFR 1.16.

☒ Any patent application processing fees under 37 CFR 1.17.

☒ The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 16-0068

☒ Any patent application processing fees under 37 CFR 1.17.

☒ Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

Date: 6/1/06



Ronald S. Tamura,
Attorney for Applicants
Reg. No. 43,179
818-493-3157

CUSTOMER NUMBER: 36802

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AMENDMENT AND REQUEST FOR RECONSIDERATION

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

I hereby certify that this correspondence is being facsimile
transmitted to the United States Patent and Trademark Office
on:

June 1, 2006

Estella Briteiro

Date

Dear Sir:

In response to the Office Action dated January 9, 2006, for which a two-month extension of time is herein requested, please amend the above-identified patent application as follows:

06/02/2006 CCHAU1 00000070 160068 10657840

01 FC:1252 450.00 DA

Serial No. 10/657,840

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Docket No. A03P1062US03